# Biology of T-cells, TCR, and antigen presentation

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# Factors influencing the Strength binding of the TCR to antigen

- Antigen binding increase by
- (TCR CD4/8 binding to MHC and antigen provides the first signal).
- Coreceptors binding;
  - T cells coreceptors are the CD4 and CD8 proteins (Th or Tc respectively). CD8 and CD4 interact with class I and class II MHC molecules, respectively.
  - These besides co-receptors CD3 and zeta chain do signal transduction to inside T cells

#### CD4 and CD8





 Cluster of differentiation (CD) are proteins expressed on T cells (CD4 or CD8) have a role in binding the MHC and used to differentiate the cells by binding to monoclonal antibodies. CD8 T cells are Tc, CD4 T cell is Th1 or Th2

#### **Costimulatory receptors on T cells**

- Provide so-called second signals for lymphocytes
  - CD28, the earliest accessory molecules induce signaling. when it bind B7 on APC, it initiate T cell proliferation by expression of IL-2 cytokine and its receptor. it binds CTLA-4 on T cell when the antigen is cleared So that T cell is regulated, lead to T cell death.
  - CD2 is a glycoprotein present on more than 90% of mature T cells, and on NK cells. The principal ligand for CD2 in humans is a molecule called leukocyte function associated antigen 3 (LFA-3, or CD58), CD2 functions as a signal transducer
  - CD40L---CD40 on B cells (important for activation and isotype switch of B cells,)

- Signal 3, cytokine effect; T cells proliferation by the effect of IL-2 growth factor from Th and Tc cell to act on itself and on B cells
- If one of these is absent----T cell anergy and tolerance
- If all present-----T cell proliferation and differentiation to effecter and memory cells
  - Effecter cell in CD4 cells is T h1, Th2 or Th17 lymphocyte
  - Effecter cell in CD8 cells is always cytotoxic T lymphocyte (CTL).

#### Costimulatory receptors on T cells





## The immunologic synapse.

- When the TCR complex recognizes MHC-associated peptides on an APC, several T cell surface proteins and intracellular signaling molecules are rapidly mobilized to the site of T cell–APC contact
- This region of physical contact between the T cell and the APC is called an immunologic synapse or a supramolecular activation cluster (SMAC).
- The T cell molecules that are rapidly mobilized to the center of the synapse include the TCR complex (the TCR, CD3, and ζ chains), CD4 or CD8 coreceptors, receptors for costimulators (such as CD28), enzymes, and adaptor proteins that associate with the cytoplasmic tails of the transmembrane receptors.

- T cells involved in
  - Defense against intracellular and extracellular pathogens (Tc in cell mediated immunity and Th help in humoral immunity)
  - Tumor immune response
  - Graft rejection
  - Autoimmune diseases

 Immunoglobulin superfamily includes the antigen receptors of T and B cells, CD3, the co-receptors CD4, CD8, most Fc receptors, CD28 and B7 adhesion molecules, cytokine receptors and the MHC molecules.



## APCs

- Antigen-presenting cells are distributed in tissues, blood and in the lymph node
- Dendritic cells, Macrophages and B cells
- Mature dendritic cells are by far the most important activators of naive T cells and activated by wide range of antigens (viral. Bacterial and allergens)
- B cell bind soluble intact antigen and present it to TH by MHC2



	Dendritic cells	Macrophages	B cells
Antigen uptake	+++ Macropinocytosis and phagocytosis by tissue dendritic cells Viral infection	Phagocytosis +++	Antigen-specific receptor (Ig) ++++
MHC expression	Low on tissue dendritic cells High on dendritic cells in lymphoid tissues	Inducible by bacteria and cytokines - to +++	Constitutive Increases on activation +++ to ++++
Co-stimulator delivery	Constitutive by mature, nonphagocytic lymphoid dendritic cells ++++	Inducible - to +++	Inducible - to +++
Antigen presented	Peptides Viral antigens Allergens	Particulate antigens Intracellular and extracellular pathogens	Soluble antigens Toxins Viruses
Location	Lymphoid tissue Connective tissue Epithelia	Lymphoid tissue Connective tissue Body cavities	Lymphoid tissue Peripheral blood



- Immature dentritic cells, exist at tissues and sites of infection, they express low levels of MHC1 & 2 and phagocytic receptor PRR, but low adhesion molecules.
- Internalization occur as a result of binding the Ag with PRR or by macropinocytosis.
- After engulfing the pathogen they become mature DC; migrate to peripheral L.N.
  - lose their phagocytic activity
  - and express more adhesion molecules, MHC and costimulatory molecules,
  - secret chemotactic factors to attract naïve T cells to the LN.



 Surface immunoglobulin (IGM or IGD) allows B cells to bind and internalize specific soluble intact antigen very efficiently. The internalized antigen is processed in intracellular vesicles where it binds to MHC class II molecules. These vesicles are then transported to the cell surface where the MHC class II: antigen complex can be recognized by Th2 cells. Because of high specificity, it is perfect when Ag concentration is low.



## Inappropriate Ag or MHC

- CD4 bind MHC2 and CD8 bind MHC1
- TCR bind both the Ag and part of MHC
- Self Ag result in immature DC and macrophages (no costimulatory molecules)....T cell anergy.



#### Effector CD4 cells

- Activated CD4+ helper T lymphocytes differentiate into
- -Th2 differentiations are mediated largely by
  - binding B cells that engulf allergen or small extracellular microbe, soluble toxins, virus or worm
  - and the presence of IL-4 from DC,
  - Th secrete cytokine to induce antibody production; IL-4 and IL-6 which activate B cell
- -Th1 differentiations are mediated by
  - -binding Th to DC that secret IL12 and IFN gamma,

-intracellular pathogen multiplying within the macrophage's vesicle after engulf infected cells,

-Th1 produces IFN gamma

-Th17; DC secret IL-6, TGF-beta in response to extracellular bacteria and fungi,

#### CD4+ Th cells

- T cells with CD4 marker (glycoprotein) represent 70% of T cells in the periphery
- Play central role in modulating immunity via secretion of cytokines that modulate:
  - B cell activation (Th2)
  - Immunoglobulin secretion (Th2)
  - Macrophage and dendritic cell activation (Th1)
  - Cellular chemotaxis and inflammation (Th17)

# Th1 or Th2 or TH17 cells

 CD4+ T helper cells can be classified into 3 based on their cytokine profiles at time of activation of CD4 and type of antigen: T helper cell type 1 (Th1) and T helper cell type 2 (Th2). And TH17

#### Antigen effect in priming TH1 or TH17 or TH2

- The nature and amount of ligand presented to a CD4 T cell during primary stimulation can determine its functional phenotype.
- CD4 T cells presented by B cell with low levels of a small antigen or toxins or worms that bind the T-cell receptor less tightly, differentiate preferentially into TH2 cells making IL-4 and IL-5. Such T cells are most active in stimulating naive B cells to make antibody. Or activate eosinophils. the antigen is extracellular helminth or allergen
- T cells presented with a high density of a ligand that binds the T- cell receptor strongly differentiate into TH1 cells that secrete and IFN-gamma, and are most effective in activating macrophages. intracellular pathogen multiplying within the macrophage's phagosomes,



- Each subset of differentiated effector cells produces cytokines that promote its own development and may suppress the development of the other subsets
- IFN-γ secreted by TH1 cells promotes further TH1 differentiation and inhibits the generation of TH2 and TH17 cells.
- Similarly, IL-4 produced by TH2 cells promotes TH2 differentiation and inhibit TH1,
- and IL-17 produced by TH17 cells enhances TH17 differentiation.



## Each subset inhibit other



#### Two subsets regulate each other



- TH2 cells make IL-4 which acts on macrophages to inhibit TH1 activation. Decrease autoimmunity
- TH1 cells make <u>IFN</u>-γ, which inhibit IL-4 and blocks the growth of TH2 cells (right panels). Decrease allergy
- These effects allow either subset to dominate a response by suppressing outgrowth of cells of the other subset. This help in using cytokines as therapy??.
- Balance toward TH1 help in cancer and allergy but increase autoimmunity
- Balance toward TH2 decrease autoimmunity
- Inhibition of TH17 helps in autoimmune diseases

CYTOKINES & DISEASE			
Event	Development of tuberculoid leprosy	Development of lepromatous leprosy	
T <sub>H</sub> activation: cytokine production	Activation of T <sub>H</sub> 1: production of IFN-γ	Activation of T <sub>H</sub> 2: production of IL-4	
Effector cell stimulation: effects on mycobacteria	Activation of macrophages: intracellular digestion of mycobacteria in cytoplasmic vesicles	Activation of B cells: antibodies have no access to intracellular mycobacteria	
Resulting pathology	Some inflammatory tissue damage, but destruction of mycobacteria	Growth of mycobacteria and severe tissue damage	

Table 3.3 The influence of cytokine production on disease pathogenesis following infection of macrophages by Mycobacterium leprae.





## CD8 cells

- Activated CD8+ lymphocytes (CTL) result from infected DC or infected cell (antigen multiply in cytosol) presentation and the presence of IL12 and IFN gamma.
- It kill cells harboring microbes as viruses or intracellular pathogen in the cytoplasm or cancer cells. By destroying the infected cells, CTLs eliminate the reservoirs of infection

#### Effector T cells



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# Th2

- TH2 functions
  - Bind B cell and secret IL-4 that lead to B cell activation and antibody secretion
  - Secret IL-5 to Activate eosinophils to react against worms
  - Secret IL-10 that suppress macrophages



# Th1

- TH1 function
  - Activate CD8, macrophages and NK to do direct killing of infected cell (by secreting IFN gamma and IL-2)
  - do neutrophil activation
  - Activate B cell to secret opsonizing antibodies belonging to certain IgG subclasses (IgG1 and IgG3 in humans that increase phagocytosis
  - Help in cell mediated immunity





Figure 1-33 Immunobiology, 7ed. (© Garland Science 2008)